**RtI Referral Form for Individual Problem Solving Meeting**

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| **Date of Referral:** | **Name of Person Making Referral:** |
| **Name of Student:**  | **Grade:** |
| **Dominant Language:** | **# of Current Absences:** | **# of Times Student was Late:**  |
| **Parent Contact Information**  |
| **Date of Contact:**  | **By Whom:** |
| **Areas of Concern:** |
| * **Academic**
 | * **Behavior**
 | * **Reading**
 | * **Math**
 | * **Speech/Lang.**
 | * **Social/Emotional**
 |
| * **Other (describe):**
 |
| **Reason for Referral: (Academic? Behavioral? Both?) Describe below.** |
| **Current Services** |

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| **Describe student’s general classroom behavior and work habits:** |
| **Strengths/Talents/Interests:** |  |
| **Areas in Need of Improvement** |  |
| **What do you want the student to be able to do that he/she is not currently doing:** |  |

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| **Benchmark Data** |
| **Fall** | **Winter** | **Spring** |
| **Level of Performance:****Rate of Growth:** | **Level of Performance:****Rate of Growth:** | **Level of Performance:****Rate of Growth:** |

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**Attach copy of most report card and/or progress report.**

**Attach copy of work sample or other data that reflects area of concern.**

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|  **Interventions Provided** |
| **Intervention:****Implemented with fidelity?: ❒ yes ❒ no** |
| **Interventionist:** | **Start Date**  | **End Date** | **Attendance rate:** |
| **Frequency: \_\_\_\_\_ x/week** | **Student Response** **❒ Positive****❒ Questionable****❒ Poor** | **Rate of Growth:****\_\_\_\_\_\_\_\_\_\_/week**  |
| **Duration: \_\_\_\_\_ minutes/session** |
|  |
| **Intervention****Implemented with fidelity?: ❒ yes ❒ no** |
| **Interventionist:** | **Start Date**  | **End Date** | **Attendance rate:** |
| **Frequency: \_\_\_\_\_ x/week** | **Student Response** **❒ Positive****❒ Questionable****❒ Poor** | **Rate of Growth:****\_\_\_\_\_\_\_\_\_\_/week**  |
| **Duration: \_\_\_\_\_ minutes/session** |
|  |
|  **Intervention:****Implemented with fidelity?: ❒ yes ❒ no** |
| **Interventionist:** | **Start Date**  | **End Date** | **Attendance rate:** |
| **Frequency: \_\_\_\_\_ x/week** | **Student Response** **❒ Positive****❒ Questionable****❒ Poor** | **Rate of Growth:****\_\_\_\_\_\_\_\_\_\_/week**  |
| **Duration: \_\_\_\_\_ minutes/session** |